This form is available electronic	ally.											Fo	rm Approve	ed - OM	B No. 0	560-0129
CCC-633 LDP U.S (06-10-03)			1.	Name, Address and ID No. of Contact Product					2. Cro	p Year	3. Com	modity				
LOAN DEFICIENCY P	AYMENT CEI	RTIFICATION A	ND APF	PLICA	ATION							4. Cla	ss/Variety/	Type <u>1/</u>		
See Page 2 for Privacy Act and Public Burden Statements.						Telephone No. (Area Code) (Optional)						5. Co	5. County Where Stored			
This form may only be completed	d AFTER harvest	or shearing and BEF	ORE losing	g title, c	control and	l risl	k of loss in	the qu	antity incl	uded ii	n this request.					
FOR COUNTY OFFICE USE ON	LY (Items 6 throug	gh 11)														
6A. Name of County FSA Office 6B. Tele		6B. Telephone No. (Ar	lephone No. (Area Code) 7		7. ST.& CO. Code		8. Farm Number(s)		9.		LDP Number	10. LDP R	ate	11. CCC-Determined Value (PCP)		
DART A - PRODUCER TERM	AS AND CONDIT	IONS (Plaasa cha	ck applied	abla "N	/ES!! or !!	MO	" Produce	r mu	et initial	for oa	ch rosponso in l		hough 19	Ψ		
12. Is the quantity of this request	Is the quantity of this request eligible to be pledged as collateral for a CCC loan? (Not applicable to hay, silage or unshorn pelts)						16. Was the quantity of this request produced by all produ this LDP and has not been purchased or acquired dire from any other source?					ucers requ	esting	YES	NO	INITIALS
13. Does more than one produce request? If "YES", all produc				17.	17. Is this the only LDP requested for this quantity?											
14. Do all producers requesting the producers of this LDP request?				18.	18. Are you or any co-applicant delinquent on any federal non tax debt?											
<ol> <li>Has any producer requesting option to purchase either verb</li> </ol>				(If "YES", provide details in the remarks)												
PART B - PRODUCER PAYMENT INFORMATION. (If more space is need and Unit of Measure 20. Stored Location						quested and 20. Stored Location					21. Date	Date Requested (MM-DD-YYYY)				
											22. Total Quantity Requested					
PART C - PRODUCER SIGN																
I certify that all information entered on the commodity described in Part B and a obtained. The producer further understar or false statement made may lead to civil commodity loan on the quantity requeste application is subject to determination by the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) that maximum eligible quantity for the date of payment if the producer is late above; and (9) the date of payment is the date of payment if the producer is late above; and (9) the date of payment is th	grees to accept the loan nds that with respect to t liability or criminal pro d for LDP and that the p CCC of the Producer's er determined by CCC to	deficiency payment (LDP) he commodity described in secution; (3) this LDP may producer may not repay or religibility to receive LDP, to be ineligible for the LDP;	rate in effect f Part B: (1) to be selected for efund any LDI and that this ap and (8) CCC:	for the app or receive por or spot che P amount pplication shall asses	olicable common payment for the color and the prince in order to obtain CCC's down and CCC's down the color and colo	nodity he con roduc btain a letern dama	y for the county mmodity, a requer will be reque a commodity lonination are sub- ages in accordance	y where uest for ired to pan; (5) pject to nce wit	the commod r payment mu provide suppl CCC may re 7 CFR Part 1	ity is sto ast be ma emental quire cop 421, as a	red and the rate in effect de at the County FSA Of documents to determine pies of sales contracts for applicable; (7) CCC shall	as of the date ffice where th program eligi r the production require the re-	of this LDP reference farm records bility; (4) that on represented fund of the L	request, we sare kept the product the product the product this a DP amount	hen all sig (2) any facer agree pplication at, plus in	gnatures are alse claim es to forgo a e; (6) this terest from
23. Producer's Signature	24. Share%	25. Date (MM-DD-YYYY) 23	ate 23. Producer		r's Signature		24. Share%		25. Date (MM-DD-YYYY)		23. Producer's Signature		24. Sh	24. Share%		ite M-DD-YYYY,
PART D - CCC APPROVAL ( 26A. Signature of CCC	DR DISAPPROV	AL. (If Disapprove B. Title	ed, compl	ete Ite	m 34)		C. Date	′MM-DE	D-YYYY)	D. Ad		Disapprove	27. The	e quanti s LDP is YES	reasor	

PART E - PRODUCER PAYMENT INFORMATION (Continuation)												
28. Quantity Requeste Unit of Measure	ed and	29. Stored Loc	28. Quantity Red Unit of Meas	queste sure	ed and	29. Stored Location						
PART F - PRODUC	ER SIGNAT											
30. Producer's Signature		31. Share% 32. Date (MM-DD-YYYY)		30. Producer's Signature	31. Share%	32. [	Date MM-DD-YYYY)	30. Producer's Signature	31. Share%	32. Date (MM-DD-YYYY)		
PART G -REMARK	S AND REAS	SONS FOR DI	SAPPROVAL									
33. Remarks												
34. Reasons for Disap	pproval											

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is 7 USC § 7231 et seq and 7 CFR Parts 1421 and 1427. The information will be used to determine eligibility and the amount of program benefits. Furnishing the requested information is voluntary; however, failure to furnish the correct complete information will result in a determination of eligibility for program benefits. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3799, may be applicable to the information provided.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0129. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.